



WAVEE US, LLC CLAIM FORM
Governor's Office of Consumer Protection
State of Georgia

Review this form before filling it out. Please type or print legibly in black or blue ink.

- Fill out the form *completely*. Failure to provide all of the information requested will not necessarily result in the denial of your claim; it could, however, delay consideration of your claim while we request additional information from you, or it could impact your ability to demonstrate your loss and/or recover restitution.
- If you are filing a claim for more than one purchase of bid credits, you will need to complete a separate claim form for *each* purchase of bid credits. You may make copies of this form or contact our office for additional forms.
- Return this claim form with copies (*no originals, please*) of the documents required in the Documents Required section.
- This form is only for people who have not previously received a refund from Wavee US, LLC for their purchase of bid credits. The Governor's Office of Consumer Protection has a copy of all the refunds Wavee US, LLC has provided consumers. If your claim is on this list, then you will be denied an additional refund.
- Fill out both pages of this form. Keep a copy of both pages and any attachments for your records.

Your submission must be postmarked on or by the 30th of August, 2011.

CLAIM FORM

Number of Bid Credits Purchased: _____

Date of Purchase: ____/____/____

Purchase Price: _____

Have you received a refund, account credit, replacement or other payment from Wavee US, LLC, your credit card company, or from any other source related to the product or service you have identified on this claim form? Yes ☐ No ☐

Have you been or are you currently a party to any legal action against Wavee US, LLC? Yes ☐ No ☐

If you answered "YES" to either question, please explain and identify any amounts you were refunded:

Please provide a brief explanation of your claim below and how you determined the monetary amount you are claiming. Please be aware that your claimed amount may be subject to verification and a representative of our office may need to contact you to ask for clarifying information.

CLAIMANT INFORMATION

Consumer Name: _____
First Middle Initial Last

Consumer's Social Security Number: _____ - _____ - _____

Mailing Address: _____

City: _____ State _____ Zip _____

Phone: (____) _____ (Day) (____) _____ (Night) Email: _____

Have you ever filed a complaint about Wavee US, LLC with the Governor's Office of Consumer Protection? Yes ☐ No ☐

If Yes, list the file number (if known) _____

I declare, under penalty of perjury under the laws of the State of Georgia, that the information contained in this claim is true and accurate, and that any documents attached are true and accurate copies of the originals. I understand that my claim and the related documents will become a "public record" under state law, and thus can be subject to a public records disclosure request and/or be seen by other people.

Signature _____

Date _____

City and State where signed _____

DOCUMENTS REQUIRED

You **must** provide the documentation described below to receive a refund from this trust account. The requirements below are the minimum requirements for processing your claims. In some cases, the Governor's Office of Consumer Protection may request additional documentation from claimants. You must submit your Claim Form by mail, overnight delivery, fax or in person and you must submit all supporting documentation **with** your Claim Form. The supporting documents must all be from prior to July 1, 2011.

1. Documents that Establish You Purchased Bid Credits from Wavee US, LLC ("Wavee")
 - (a) Credit card and/or bank statements showing a charge by Wavee;
 - (b) Email confirmation from Wavee of your purchase of bid credits; or
 - (c) Any other form of documentation that demonstrates you purchased bid credits from Wavee.
2. Documents that Establish Your Purchase of Bid Credits was Unintentional
 - (a) Copies of complaints you submitted to Wavee;
 - (b) Copies of complaints you submitted to the Better Business Bureau;
 - (c) Copies of complaints you submitted to any governing body, including, but not limited to any attorney general's office, the Governor's Office of Consumer Protection, or letters and/or emails to elected officials;
 - (d) Copies of letters and/or emails to credit card companies disputing the charge; or
 - (e) Any other form of documentation that demonstrates your purchase of bid credits from Wavee was unintentional.

Mail completed Claim Form and accompanying documents to:

Wavee Restitution Program

Governor's Office of Consumer Protection
2 Martin Luther King Jr. Drive, Suite 356
Atlanta, GA 30334-4600

Toll Free Telephone Number 1-800-869-1123 (In Georgia, outside the Metro Atlanta dialing area)
404-651-8600 (in the Atlanta Metro dialing area or outside of Georgia)
Fax Number 404-651-9018

The Claim Form must be returned postmarked no later than the 30th of August, 2011

